

NOTICE THAT LEGAL PRACTITIONER CEASES TO ACT

Court Reference: _____

Name of Child: _____

Gender: _____ Date of Birth: _____

Address: _____

This form is filed on behalf of [*name of party*]: _____

Address: _____

This matter is next listed on: _____ for: _____

TAKE NOTICE that the legal practitioner (or firm) indicated below no longer acts for the person(s) named.

FORMER LEGAL PRACTITIONER'S CONTACT DETAILS
Firm: _____
Practitioner's name: _____
Address for service: _____
Email: _____
Contact no.: _____
Solicitor Code: _____ Reference: _____

FORMER CLIENTS CONTACT DETAILS (IF KNOWN)
New practitioners name (if known) _____
OR
Address for service: _____
Contact no.: _____
Email Address: _____

Date: _____

Signed